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433	24
Class	Subject class

ISSUE CLASSIFICATION

PATENT NUMBER

U.S. UTILITY Patent Application

<p>O.I.P.E.</p> <p>45 BOOKED 154 on Am</p>	<p>PATENT DATE</p>
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APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/941237	D	433	24	3732	4332

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TITLE Custom orthodontic appliance forming method and apparatus

PTD-20
12/99

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<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg. 23	Figs. Drwg. 29	Print Fig. 9A	Total Claims 3	Print Claim for O.G. 1
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	Meiba Bumgarner 7/10/04 (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____	Kevin Shaver 7/10/04 KEVIN SHAVER SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 3700 (Primary Examiner) (Date)			ISSUE FEE	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	La N. Hyl 7-12-04 (Legal Instruments Examiner) (Date)			ISSUE BATCH NUMBER	
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